

ECS/EMD Configuration Change Request

Page 1 of 1 Page(s)

1. Originator Joan H. Schessler	2. Log Date: 09/30/04	3. CCR #: 04-0513	4. Rev: —	5. Tel: 301.925.0426	6. Rm #: 3068C	7. Org. SEIT
8. CCR Title: Add Criteria CCR Number Column to EMD Verification Status Report						
9. Originator Signature/Date Joan H. Schessler /s/ 9/29/04			10. Class II	11. Type: CCR	12. Need Date: 10/5/04	
13. CCR Sponsor Signature/Date Evelyn N. Nakamura /s/ 09/29/04			14. Category of Change: VDB		15. Priority: (If "Emergency" fill in Block 27). Routine	
16. Documentation/Drawings Impacted (Review and submit checklist): N/A			17. Schedule Impact: N/A		18. CI(s) Affected: VDB TOOL	
19. Release Affected by this Change: N/A		20. Date due to Customer: N/A		21. Estimated Cost: None - Under 100K		
22. Source Reference: <input type="checkbox"/> NCR (attach) <input type="checkbox"/> Action Item <input type="checkbox"/> Tech Ref. <input type="checkbox"/> GSFC <input type="checkbox"/> Other: NCR 41238						
23. Problem: (use additional Sheets if necessary) New Verification Plan Format needs to include the Criteria CCR number for each criterion. Since other verification data for the Plan will be picked up from the EMD Verification Status Report, it is appropriate for the Criteria CCR Number to be included in that report. This is urgently needed to support I&T Plan development.						
24. Proposed Solution: (use additional sheets if necessary) Insert the Criteria CCR column immediately following the criteria statement column.						
25. Alternate Solution: (use additional sheets if necessary)						
26. Consequences if Change(s) are not approved: (use additional sheets if necessary)						
27. Justification for Emergency (If Block 15 is "Emergency"):						
28. Site(s) Affected: <input type="checkbox"/> EDF <input type="checkbox"/> PVC <input type="checkbox"/> VATC <input type="checkbox"/> EDC <input type="checkbox"/> GSFC <input type="checkbox"/> LaRC <input type="checkbox"/> NSIDC <input type="checkbox"/> SMC <input type="checkbox"/> AK <input type="checkbox"/> JPL <input type="checkbox"/> EOC <input type="checkbox"/> IDG Test Cell <input type="checkbox"/> Other						
29. Board Comments:			30. Work Assigned To:		31. CCR Closed Date:	
32. SCDV CCB Chair (Sign/Date): Byron V. Peters /s/ 10/15/04			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS			
33. EDF CCB Chair (Sign/Date):			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS			
34. ECS CCB Chair (Sign/Date):			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ESDIS			